urine gradually becoming clearer until it is perfectly so, and contains albumen or casts or coloring matter of bile or blood; no return of nausea. Pulse 102; Temp. 97° F.; Resp. 19. Still unable to move without help.

November 21st. Urine again became cloudy, but no other indication of a relapse. It contained no albumen.

November 22d. Urine has again become clear; gained some strength; takes food with a little less reluctance. From this time on the case has progressed satisfactorily, without an untoward symptom, the only feature worthy of note being the slowness with which strength was regained, it being fully two months before the patient was able to walk, although requiring no attention other than a general tonic treatment.

A fourth case is reported, not because of any special clinical difference from the preceding ones, but because in it a post-mortem examination was made, and on the result of that the ideas as to pathology subsequently expressed are in the main founded.

CASE IV.—Rufus W., a negro man, 40 years old, strong, robust, athletic, a farm laborer, residing about four miles from town, near low grounds of Tar river. Was taken suddenly while at work in the field, picking cotton, on October 13th, 1886. Had a chill in the afternoon and returned to the house. At night, in a semi-conscious condition, he undertook to go out the door to void urine; in the effort it was noticed by his companions that a quantity of bloody urine was passed along the floor, from bed to door; immediately a physician was sent for; upon arrival patient was found delirious, with great prostration. Pulse rapid and feeble, 120; Temp. 100% F.; Resp. 22.

The black skin did not show the icteric hue, but conjunctiva, lips and tongue were of characteristic color; urine scanty and dark reddish brown, and passed unsconsciously in bed; contained some morphological elements as in preceding case; agonizing nausea and obstinate constipation.

October 14th. Considerably worse; pulse so weak and quick as to be scarcely able to count; Temp. 97° F.; Resp. 33. Urine passed unconsciously and of same character as before; nausea continues; greater prostration; skin cool and clammy.

October 15th, 9 A. M. Prostration still greater; died about 2 o'clock P. M., being about forty-eight hours from time first taken. Post, mortem four hours after death; result is given further on.

Before giving the results of my own study as to the nature and pathology of the disease, let us briefly review the prevailing idea in regard thereto, then compare with my own and see wherein they differ and wherein the observations of others are corroborated.

The principal pathological lesion is in the liver, spleen and kidney, only such changes being found in other organs as would naturally